Effective October 1, 2003												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL EI	VIIIV	OR	OTHER SMALL E	
TO	TAL CLAIMS							RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		•	ASIC FEE	385.00	OR	BASIC FEE	770.00
10	TAL CHARGEA	BLE CLAIMS	12 minus 20=		· 24			XS 9=	216	OR	XS18=	- ;
<u> </u>	EPENDENT CL		4 minus 3 =		• /			X469	740	OŘ	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							1	+145=	10	OR	+290=	
• If the difference in column 1 is less than zero, enter "0" in column 2							L		771	OR	TOTAL	
											OTHER	THAN
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL E	
E E	·	CLAIMS REMAINING AFTER		HIGH NUM PREVIO	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	- UL	Minus		74	/	П	X\$ 9≠		OR	X\$18=	
JEN	independent	. 4	Minus		4	•	IT	X43=		OR	X86=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	4145=		OR	+290=	
								TOTAL		OR	TOTAL	
1	MINIAG	•		10 . 1	0\	(Column 3)	Al	DDIT. FEE	L		ADDIT, FEE	
MENDMENT B.	کاران ایک	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 45	Minus		14	•	\prod	X\$ 9=	4	OA	.X\$18±	
	Independent	• 5	Minus	***	4	= /	11	X43=	44	OR	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						۱ <u>۱</u>	+145=		OR	+290=	•
								TOTAL DOTT. FEE	53	OR	ADDIT, FEE	
		(Column 1)		(Cotu	mn 2)	(Column 3)	<u>.</u>	• •				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA	\prod	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 45	Minus		15] [X\$ 9=		OR	X\$18=	•
	Independent	• 5	Minus	5		-	11	X43=		OR	X86=	
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
٠.,	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								• • •	OR	TOTAL ADDIT FEE	
		mber Previously P imber Previously P riber Previously Pa	- \ A P-A #191#	~ ~~~				DOIT FEE	propriate bo	,	•	·

Application or Docket Number

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